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Dementia, care and elder abuse in late twentieth-century detective fiction: Reginald Hill's
Exit Lines and Michael Dibdin's *The Dying of the Light*

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Dementia-themed detective fiction has become something of a trend. This article extends the critical history of this development back in time to a period often ignored by scholars, considering two noteworthy examples from the late twentieth century: Reginald Hill's (1984) *Exit Lines* and Michael Dibdin's (1993) *The Dying of the Light*. Through textual analysis and historical contextualisation, the article shows how these novels raised disturbing questions about dementia care, older people's rights and therefore their citizenship. Both texts make sophisticated use of the distinctive affordances of the detective fiction genre to comment on failings of care in their time, belying common assumptions that the productive engagement of detective fiction with dementia is a recent innovation.

Keywords: Detective fiction; dementia; care; ageing; elder abuse

In recent years, dementia-themed works of detective fiction genres have burgeoned, corresponding to increasing societal preoccupation with the condition (Falcus and Sako 114). In reflecting on this development, scholars have highlighted how the idiosyncratic conventions of the genre, whether followed or subverted within the text, make distinctive contributions within the wider fictional treatment of dementia. These discussions have overwhelmingly focused on the use of detective protagonists who have dementia, seen in novels from the last decade such as Alice Laplante's *Turn of Mind* (2011), Henning Mankell's *The Troubled Man* (2012), Emma Healy's *Elizabeth is Missing* (2014), Mitch Cullin's *A Slight Trick of the Mind* (2014), and Paul Cleave's *Trust No One* (2015). The innovative casting of individuals with dementia as sleuths is arguably the most striking feature of the new wave of dementia-themed crime fiction, creating new opportunities for writers to explore the subjective experience of dementia and reflect on the meaning of memory, selfhood and agency, through the hermeneutic paradoxes offered by a detective who struggles to retain clues or connect events (Harris; Meeks; Orr, *Dementia*).

Almost without exception,¹ however, critical discussion of the dementia-themed detective fiction sub-genre has been conducted without reference to earlier detective novels dealing with dementia. Readers of this secondary literature might be forgiven for assuming that it was only in the twenty-first century that detective fiction authors considered dementia in any significant way.² Works prior to 2011 are mostly ignored, or sometimes dismissed with a cursory comment noting that they fell far short of the new generation of novels in engaging with how it might feel for individuals to have dementia, or in representing them as figures with any kind of agency. For example, Rebecca Bitenc offers the critique that

rather than exploring the possibility that narrative fiction offers to inhabit another person's consciousness imaginatively, in a large number of novels dementia functions merely as a structuring device or as a theme. (307)

This point is echoed in a more recent review suggesting that detective fiction in which dementia acts as ‘more a narrative device than a thematic focus [...] tend[s] to promulgate a narrative of dementia as the inevitable and incremental erosion of self’ (Falcus and Sako 120). These analyses assess texts largely on the depth of their portrayal of ‘what life is like’ (Harris 58) for people with dementia. Held to this standard, many appear deficient: in earlier detective novels – and also in many recent examples – the experience and perspectives of characters with dementia were indeed routinely overlooked while those of (cognitively-intact) others around them tended to be privileged within the narrative, arguably mirroring and contributing to pernicious societal assumptions that equate dementia with a biomedically-framed totalising loss of self and personhood. However, in rightly highlighting the absence of ‘voice’ afforded people with dementia in these texts, much criticism today marginalises the novels produced by the precursors of LaPlante, Healy and their fellows. While these texts did not centre people with dementia as protagonists or otherwise focus on their inner life, they nevertheless repay critical examination on other grounds, notably those of social critique.

The current wave of dementia-related crime fiction was prefigured by a handful of earlier examples. Reginald Hill’s *Exit Lines (EL)* (1984) and Michael Dibdin’s *The Dying of the Light (TDOTL)* (1993), both within the British tradition of detective fiction, can be counted among the most striking. These two commercially and critically successful authors used detective fiction narratives to reflect on dementia in relation to key preoccupations of the time. In this article I extend the critical history of dementia-themed detective fiction back in time by revisiting these late twentieth-century texts, discussing them in their own terms rather than through a ‘deficit’ lens that exclusively considers what they do *not* do. While neither took as its focus the subjective experience of dementia, both mediated pressing issues of social concern relating to the treatment of older people and dementia. Using the vehicle of detective fiction, with the genre’s implicit social commentary on where the boundaries of

criminality and order lie, they considered abusiveness in, or inadequacy of, the care provision of their socio-historical moment. Both also made creative use of the expectations of the genre to provoke this reflection, whether by unsettling expectations of mystery closure or by highlighting the artificiality of detective fiction's conventions. As such, they deserve more scholarly attention than they have so far received.

Crime fiction and Dementia

Some might ask why the genre's treatment of dementia merits this critical attention. Viewed pragmatically, detective fiction matters because it is read widely, often by readers who are simply fans of the genre and may have little interest in accessing other material on dementia. Books within established series or by well-known authors, such as those discussed within this article, are likely to be picked up by readers who are not otherwise interested in dementia. This makes detective fiction a powerful medium for influencing the casual public's perceptions of the condition, all the more so because as genre fiction much of what its characters and narrative communicate about dementia acts on an implicit level. By contrast, the declarative statements found in dementia non-fiction are more considered, explicit, and directive in guiding readers' thinking. In the period covered in this article, when television programming, fiction, and medical and self-help advice books on dementia were much rarer than today (Orr, *Carers* 81), there were fewer outlets to convey to the general public a multi-dimensional account of dementia and what to expect from it. In this context, the tropes to be found in fiction take on added significance in either reinforcing stereotypes or provoking readers to reconsider their assumptions.

Critically too, detective fiction has proved to hold rich pickings for scholars considering how its distinctive conventions interface with its treatment of dementia. In these novels, people

with dementia repeatedly find themselves ‘investigating’ as they seek to orient and re-orient to time, or unfamiliar people and settings. In dementia detective novels where the perspective of the person with dementia is central, readers follow genre expectations in finding themselves engaged with this process of investigation (Orr, *Dementia*; Zimmermann 117). They are often forced to question particularly closely the reliability of narrators with dementia and pay close attention to their experiences. Through this process, they are encouraged to empathise more closely with lived cognitive impairment. Coming to identify with the experience of dementia in this way brings into stark relief how frequently the viewpoints of those with dementia are dismissed out of hand and encourages readers to question whether this is really justified (Burke, *Missing*; Sako). However, not all detective fiction makes such convincing efforts to engage meaningfully with dementia, and many novels have been critiqued from a disability studies standpoint for reducing the lived complexities of the condition to a thin set of tropes that fail to challenge or enlighten. Falcus and Sako (120-123), for instance, argue that in Mankell’s *The Troubled Man* the appearances of Inspector Wallander’s developing symptoms are used to evoke intermittent moments of dread, culminating in his descent into ‘the empty universe known as Alzheimer’s disease’ (Mankell 501) and the conclusion of the series. However, they rather conveniently do not interfere with his investigation or lead to any rounded exploration of dementia experience, and overall Mankell perpetuates perceptions that there are no meaningful stories left to those who have dementia. They critique too Peter May’s *The Lewis Man*, in which the biographical disruption of dementia, which drives the plots, is too facilely resolved with the resolution of the mystery and somewhat contrived restoration of the self to continuity (Falcus and Sako 124-127).

Stuart Murray has drawn attention to the rise of ‘neurotecs’: detectives characterised by neurodiverse cognition which frequently gives them an alternative – sometimes privileged –

perspective on the narrative's mystery. Detectives with dementia, as seen in a novel such as *Elizabeth is Missing* (*EiM*), can be considered a form of neurotec. In *EiM*, the cognitive changes produced by dementia lead Maud, the protagonist, to engage in persistent searching. It is this activity which ultimately enables her to find the solution to a decades-old mystery. Her achievement challenges readers to look beyond purely medical 'deficit' views of dementia to a more rounded consideration of its lifeworld (Meeks).

As well as shaking conventional views of dementia, this literature also destabilises conventional expectations of the detective novel. Both Meeks and Harris have shown how dementia, by rendering memory precarious, prevents the traditional, neatly ordered plot resolution once so expected of the genre and destabilises the identity of the sleuth as rational solver of mysteries and guarantor of justice. Such dementia-themed work, therefore, draws on elements of 'metaphysical detective fiction' (Harris; Sako). Metaphysical detective fiction 'parodies or subverts traditional detective-story conventions – such as narrative closure and the detective's role as surrogate reader – with the intention, or at least the effect, of asking questions about mysteries of being and knowing which transcend the mere machinations of the mystery plot' (Merivale and Sweeney 2). Dementia, meanwhile, necessarily asks what conditions of possibility exist for life and narrative when chronology, clues and answers become difficult to retain. Cultural metaphors that have become common currency cast dementia as a kind of 'criminal': a 'thief,' 'intruder' or 'killer' (Orr, *Dementia* 564). Yet it is one that the detective cannot hope to defeat.³ If detective fiction opens up alternative vistas on reading dementia, dementia returns the favour.

Critical consideration of *EL* and *TDOTL* will show that this interrelationship between dementia and metaphysical detective fiction was in evidence well before the new wave of dementia detectives. Both Hill and Dibdin challenged the standard assumptions of the traditional detective novel. However, in exploring dementia and vulnerability they also raised

uncomfortable questions for readers about society's approach to ageing, dementia and care. Hill's vehicle for this was the police procedural, featuring detectives with an established fictional existence within his oeuvre, while Dibdin's novel was a one-shot set in a nursing home and parodying the amateur detectives of the British Golden Age of crime fiction. Because of their quite distinct stylistic approaches, juxtaposing them shows the richness detective fiction brought to the theme of society's response to dementia. Though neither offers the kinds of insights into the lived experience of dementia that we have come to expect from the new wave, both found powerful ways of drawing attention to the failures of care while pushing boundaries of the detective fiction form.

Exit Lines

Exit Lines was the eighth novel in Hill's Dalziel and Pascoe series, one of the 'mainstays of British detective fiction' (Bradford 38). From the outset, the novel signals that the situation of the older age-group is a key theme. The opening epigraph, quoting Alexander Pope, bitingly sets the tone: 'See how the world its veterans rewards!' (Hill 3). The first sentence announces that 'three old men [...] died' (7), and the ensuing paragraphs carefully inform the reader not only of the circumstances of their deaths but of their precise ages, obituary-style. The novel proceeds to criticise 1980s Britain's provision for older people: characters' commentaries on how the old are treated in contemporary society pepper the text, from the respite home manager's account of families abandoning their relatives to state care (95), to the warden's musings on 'the old folk problem' (76) and several characters' thoughts on the burdens of caring.

The theme of older people's experience develops through the cumulative narrative impact of five interweaving plotlines. First: the violent death of Tap, a 71-year-old man, is eventually

solved when it is realised that one of the witnesses, Mrs Escott, unknowingly omitted a day from her statement due to her incipient dementia; this revelation leads to the discovery that she herself carried out the fatal assault while in a state of confusion. Second: the murder of 73-year-old Robert Deeks turns out to have been committed for financial gain by his grandson's girlfriend, Andrea, whose open contempt for the elderly finds its expression in declarations that they are like 'animals' (277) and 'should get put down' (291). Her own grandfather is in hospital at the end of the book following a fall down the stairs – precipitated, it is heavily suggested, by one of Andrea's parents, under the strain of caring. Third: a respite care home manager is found to be systematically embezzling funds by providing the residents with inferior food and homestuffs. Fourth: while these investigations are unfolding, Pascoe and his wife Ellie, in a narrative thread focusing on the domestic rather than on detection, are concerned about her father's cognitive decline. Ultimately, they see that her mother, Madge, is managing the situation stoically and the affection she still shares with her husband affirms the positive side of aging. However, this warm moment is a rare instance of optimism in a text where identification of the guilty does little to temper the bleakness of old age.

Pascoe's in-laws aside, the text presents a bleak vista for its older protagonists. Very few escape unscathed. The final tally is one serious injury (Andrea's grandfather's fall) and four deaths: beyond those already mentioned, 70-year-old Philip Westerman is run over, apparently by a drunk Inspector Dalziel, and Mrs Escott commits suicide, motivated not just by the guilt of having caused her friend Tap's death, but also perhaps by fear of the mental decline awaiting her. Hill permits no direct insight into her thoughts. Though the omniscient narrator switches fluidly between the perspectives of his detectives, characters who have dementia are portrayed only through the eyes of the policemen; indeed, it is key to maintaining the mystery that the reader should not look too closely at Mrs Escott's subjectivity, so that her culpability comes as a surprise. The reader is given privileged access

to the young Detective-Constable Seymour's unspoken surprise on meeting her that she does not present as 'some wild woman of the woods, with mad eyes and unkempt hair', but rather as 'ordinary-looking' (78). Her role appears to be that of (possibly unreliable) witness, and it is only when her suicide attempt is discovered and Pascoe realises that she caused Tap's fatal injury, that the authorial misdirection becomes clear. Unlike Andrea, she is denied the opportunity to offer any of her own developed explanations or views on the events, uttering only semi-coherent comments about awful dreams and visions of Tap, which are just enough to confirm Pascoe's theory. Others reach their own judgements instead, judgements which – perhaps partly assuaging a sense of guilt over the police's role in her death – are often dismissive of the value of continued living: 'What did the future hold but at best a few twilit years of being bullied by the nurses in a geriatric home?' (295).

There are indeed failures of care in evidence everywhere, from the exploitation taking place within the respite home to the way that families are seemingly left without support to cope with older relatives. Deeks' daughter feels guilt after his murder that she did not bring him to live with her. Tap died of exposure in a playing field, with houses in every direction (37) – an image of abandonment that is no less striking for being due to bad luck rather than malice or neglect. By the close of the novel, on discovering Andrea's grandfather – a character metonymically reduced by dementia to the constant, repetitive demands he makes of his daughter – in hospital following his 'fall,' Pascoe can no longer muster the energy or indignation to act on his suspicions of the family. Instead, in what he acknowledges to himself to be a 'betrayal' (298), he chooses to go for a drink with the attending physician. The message is grim and undermines the standard role of the detective as agent of social order and restitution: even the consummately liberal Pascoe cannot quite see a man with advanced dementia as fully a person, deserving protection from abuse, but instead empathises more with the desperation or resentments of his carers.

The portrayal of Pascoe's father-in-law acts as a counterweight to this bleakness, an idealised vision of family care to contrast with the cold world lived in by many of the older people caught up in the police investigations. When Pascoe's mother-in-law says that her husband is

‘His *old* self. Himself, but old, I mean’ (246-7),

she is making a claim for the continuing value of identity based on relationships and refusing to define Archie by his current difficulties with memory or orientation – he is still himself.

Madge's calm acceptance of the situation resolves a narrative arc which until now has emphasised Ellie's despair at the situation. It thereby provides a tenuously optimistic counterpoint to the other plotlines, with their focus on death, burden or abuse. Here too, the narrative focuses on Ellie and Madge as carers far more than it does on Archie himself, showing limited interest in what it might be like to have dementia. However, it at least offers an example of a positive old age despite dementia amidst the otherwise gloomy outlook Hill portrays.

In *EL*, the character commentary, the epigraphs that open each chapter, and the unfolding of events combine to highlight society's neglect of the care needs of older people. The injustice of this is denounced and yet, the contrasting portrayal of Pascoe's father-in-law aside, and even making allowances for the crime genre's inherent proclivity for focusing on the dark side of humanity, the novel offers few instances of hope. Where good care is seen, it invariably comes from the older person's family, or in Mrs Escott's case, her friend (Tap, who is killed for his trouble); the message is that one cannot rely on paid carers (who may exploit their charges) or on the servants of the state (such as Pascoe, who wearily fails to follow up probable elder abuse at the story's close).

The book's predominant tone of pessimism, and its objectifying treatment of people with dementia, reinforce problematic messages. A key concern of gerontologists and activists in

recent years has been to dismantle the widespread assumption that ‘living well with dementia’ is a contradiction in terms. *EL* at times seems to embody this assumption. In particular, Mrs Escott’s suicide is clearly recognisable among the tropes flagged by literary disability studies as that of ‘disposability’. Here, where a character with a disability has served their plot purpose, they quickly die or are killed, as the prevailing symbolism of disability means that this dramatic departure makes more impact and disrupts ‘normality’ less than their continuing presence would do (Snyder and Mitchell). Though the detectives experience guilt and pity at her death, her mental state is barely discussed; it is simply seen as natural that she should choose to end her life, less because of her role in Tap’s death than because of the expected course of her dementia. Mrs Escott herself largely exists to drive the plot and is not rounded out as a character beyond this. Dementia in *EL* certainly functions as a plot ‘structuring device,’ in the manner denounced by Bitenc (307). This is arguably understandable within the broader genre conventions of detective fiction, where plot is generally privileged above other elements of writing. Yet in turn this prioritisation of plot might raise ethical questions about the suitability of detective fiction to tackle themes like dementia.

Here it is important to contextualise the novel within its time. Published in 1984, it long predated the principal medical breakthrough to date: the ‘cognitive enhancer’ medications. The first of these, Tacrine, was licensed only in 1993. That no medical advancement had yet been made meant that therapeutic nihilism predominated among the public and most medics. The Alzheimer’s Disease and Related Disorders Association was campaigning for investment in medical research, employing a strategy which contrasted the capable, contented individual pictured by ‘successful aging’ gerontology with the hapless, dependent dementia sufferer (Ballenger, *Self*, 137); while this was effective in convincing policy-makers of the urgent need to address the condition, it reinforced perceptions that dementia quickly robbed

individuals of their selfhood and subjectivity. Often, neither patients nor doctors saw much value in obtaining an early medical diagnosis, due to the absence of treatments; consequently, by the time individuals presented for diagnosis their condition was usually more advanced than might be expected today and their ability to communicate their experiences accordingly more attenuated, even as wider society dismissed the validity of what they might have to say simply because of that diagnosis (Miller, Glasser and Rubin 142; Bartlett and O'Connor 17). Against this background, attempting to explore the inner experiences of people with dementia was a challenge that most fiction writers outside the world of psychotherapy were ill-prepared for; indeed, attempting to do so may well have seemed presumptuous.

Social care for older adults, meanwhile, was facing into rapid growth in care needs without commensurate funding increases. The tensions referred to in the novel between families needing support from the state and Social Services departments needing the families to provide the care reflected this. British society was becoming gradually more aware of the extent to which the domestic home could harbour dangers of mistreatment for older residents. Doctors had drawn attention to the occurrence of 'granny battering,' as it infelicitously became known, in the 1970s, and by the early 1980s elder abuse was coming into view as a key concern for social services (Ogg and Munn-Giddings 390-391). However, it did not become a key policy priority until the end of the 1980s (Penhale 152). Hill in 1984 was therefore dealing in his fiction with an issue that had not yet achieved the prominence it would later reach. *EL* thus demonstrates the potential of detective fiction to comment on and stimulate consideration of social issues; that in doing so it marginalised the subjective experience of dementia reflects – indeed, faithfully represents – the dominant attitudes and state of knowledge of the time (Bartlett and O'Connor).

EL's ending steers it into the category of metaphysical detective fiction. The title is revealed to refer to the last words one utters before dying (297); in Mrs Escott's case, these take the

form of a racing tip passed on to her in a posthumous vision of Tap, which she dies just before managing to pass on. Pascoe reflects that death for most amounts to

the doors closing, the light fading, the lift descending, with nothing said, nothing communicated. (298)

As the conclusion to a murder mystery – a genre that traditionally depended on excavating the truth about death, relying for its existence on the possibility that the last moments of the dead can be recovered, that the deceased can still ‘speak’ to the investigator – this is a challenging resolution. Following on directly from Pascoe’s weary refusal to get involved in the ‘accident’ of Andrea’s grandfather’s ‘fall,’ it unsettles the foundational assumption that detectives can resolve mysteries and restore order in the face of death. ‘It’s not knowing that makes horse races,’ Pascoe comments (297). Although significance seems to be conferred on this utterance by its positioning towards the culmination of the text (Brooks 95), how it should be read remains ambiguous. Does ‘not knowing’ leave room for hope for old age, as we are perhaps better off not knowing how bad things may – and for many of the characters, do – get? Or does ‘not knowing’ allude to the blind eye Pascoe deliberately turns to the possibility of elder abuse leaving Andrea’s grandfather hospitalised? Or both? Either way, it challenges the classic notion of the detective as the hero or oracle who might confer certainty, bringing just retribution and making the world safe again. Ageing, and its attendant decline and indignities, is not amenable to such feats.

The Dying of the Light

Nearly a decade later, Dibdin’s Agatha Christie pastiche explored abuses within residential care. The first part of the novel portrays the relationship between Rosemary Travis and Dorothy Davenport, two care home residents who pass the time staving off boredom by

collaboratively inventing Christie-style narratives about their fellow residents. In the second part, the police reluctantly begin an investigation into Dorothy's death by overdose, as Rosemary claims that one of her fellow residents has committed in reality the kind of murder she used to invent with her friend. Inspector Jarvis suspects Rosemary of senility, but slowly realises that the home's owner, Anderson, and his sister Letitia are inflicting criminal abuse on the residents. Rosemary's (albeit eccentric) lucidity is ultimately confirmed when it is revealed that she contrived a whodunnit around Dorothy's suicide with the intention of provoking the police to look more closely at the situation within the home.

The text functions as an extended send-up of the classic Golden Age detective novels. The elderly spinster solving mysteries; the closed community presenting a conveniently limited set of suspects; the convoluted murder methods: all these are classic features of the genre. However, the reader's attention is constantly drawn by *TDOTL* to their stereotypicality, not least by Dorothy's and Rosemary's regular invocation of what the latter calls 'the absolute and eternal rules of the genre' (60). The text also frequently highlights its own artifices to the reader (Malmgren 6-7). On the very first page the reader is introduced to Rosemary, whose internal monologue refers to 'allotted role[s] in the play of life' (3). In the following paragraph she names her fellow 'guests,' rather as Christie would set out her gallery of potential suspects for consideration at the outset. However, it rapidly becomes clear that this roll call is no more than the roles the other residents have been assigned within the fiction she and Dorothy weave together; we learn little about their real identities, as though these did not really matter. Scattered within the characters' conversations are commentaries on the porous boundaries between fiction and reality, from Anderson's observation, 'Thus are we constrained by fictions' (78), to Rosemary's final verdict, 'If this were a story perhaps. But [...] this is real life, and life is perfectly shameless' (151). A staged fictionality is apparent even in Inspector Jarvis's key character quirk, an obsessive historical knowledge of the

defunct English football team Accrington Stanley; it turns out that Jarvis's interest in football is based purely on the performative elegance of radio commentary and that the messiness of a 'real' football match left him bewildered (86). No less than Rosemary and Dorothy, it seems he prefers fiction to real life.

This foregrounding of the tale's fictionality is accentuated by the careful use of narrative technique. *Mise en abyme* is the framing of a miniature example of an artistic form within an encompassing one which it mirrors (Dällenbach). A classic example can be found in *Hamlet*, where the device of the 'play-within-a-play' reflects the themes of the wider work. The story Rosemary and Dorothy collaborate on serves this function in *TDOTL*. Indeed, conversation about the miniature story directly foreshadows the resolution of the encompassing one early in the book, noting that the staff can't be murderers (19), that Dorothy (who turns out to be her own murderer) is the only one who doesn't have an alibi (19), and pointing out the merits of the eventual murder method (26). The different levels of the *mise en abyme* allow this foreshadowing to take place in plain sight without directly tipping off the reader as to the circumstances of Dorothy's death. Furthermore, as Rosemary and Dorothy filter the people and events around them through the lens of detective fiction, they mirror the mechanics of the encompassing text and how the reader, primed to read a whodunnit, approaches it.

Reinforcing the frequent in-text allusions to the porous boundaries between fiction and real life, this device positions *TDOTL* as a postmodern genre parody.

Nevertheless, enough of the plight of the residents shows through this knowing self-awareness to enable the reader to become involved with them. The pain and fear Dorothy experiences due to her medical condition, and the desperate need she and Rosemary have of each other's friendship in enduring their situation, evoke genuine sympathy. Though the novel engages less with the perspectives of the other residents, readers are nonetheless likely to be struck by the harsh conditions they experience and what we see of the effects it has on

them. In a significant passage, Dibdin draws attention to the tendency of both crime authors and readers to subordinate characters' emotional experiences and suffering to the role they play in the whodunnit puzzle. Rosemary reflects about the other residents:

She and Dorothy had spent their whole time taking their distance from these people, turning them into cardboard characters whom they manipulated to suit their whims and the twists and turns of the story. Now Dorothy had made them real, given them depth and feeling, turned them into human beings united in this mindless warmth like a litter of animals in a burrow. (Dibdin 59)

Golden Age detective novels have been critiqued, at least since Raymond Chandler's day, for their stylised treatment of murder, bereavement, loss and fear of death. Paying little attention to simulating the authentic emotional responses that these might be expected to provoke, they are often primarily puzzles rather than explorations of character or the human condition. By describing, and implicitly critiquing, how readers collude with this depersonalisation of characters caught up in a murder mystery, Dibdin startles them into awareness of – and thereby subverts – the mechanics of the classic crime novels.

Yet read within the context of the residential care home setting, this passage works on another level as critique of ageist social attitudes underpinning the lack of person-centred care to be found there. That Rosemary is – in a dig at the classist norms of Golden Age detective fiction – a notable snob and shares this disrespect for her fellow residents does little to undermine this point. Like the oblivious narrators of the mystery story, those who run Eventide Lodge and the society that accepts its operation refuse to acknowledge 'depth and feeling' in its residents. Readers, already recognising that they too collude with the depersonalisation of the characters populating the mystery plot, are invited to ask themselves whether they were all the more ready to view them as only 'cardboard characters' because of

their status as elderly residents of a nursing home, and if so, what this suggests about ageist assumptions in contemporary society. Similarly awkward questions are raised by readers' uncertainty over the truth behind Rosemary's accusations. Clearly abuse is occurring within the home, but the extravagances of their mutually elaborated detective story make Rosemary and Dorothy almost comically unreliable narrators. The reader, like Detective Jarvis, must wonder if the abuse goes as far as Rosemary claims. Hints are dropped about suspicious changes to residents' wills; the Andersons threaten the residents; plastic blocks the view from the window, cutting them off from the outside world: does this treatment extend to torture and murder? Being required by the narrative to consider the question in this form itself raises uncomfortable doubts about what kinds of treatment are being 'normalised.' Dibdin reinforces this doubt by ensuring that the denouement sees the criminals arrested for abuse, not for murder. Indeed, no murder happened. The confounding of genre expectations by this decidedly anticlimactic ending highlights that elder abuse should be considered significant in itself, not simply as a pointer to a greater crime.

While Miss Marple was often assumed by other characters in Christie's novels to be befuddled, the reader was always aware that this appearance was no more than a mask Marple used for her own purposes (Hepworth 111). One cannot be so confident with Rosemary, who sometimes seems to struggle to distinguish between fictional tropes and real life. Readers are forced to pay extra attention to her words and actions to try to break the code that might indicate either her senility or soundness of mind. When Dorothy drops the shared whodunnit narrative to voice her horror at catching sight of Canning's mauled body, Rosemary smoothly reaffirms the thread of the fiction by incorporating the discovery into their fabricated story. Her actions symbolically mirror this verbal manoeuvre: Dorothy had dropped her knitting earlier, and, 'picking up the shapeless mass of frayed yarn which Dorothy had unravelled, [Rosemary] started to wind it rapidly into a neat ball' (18).

Rosemary ensures that their own neat construction is not disrupted by the disorder of reality, but how this is to be understood is ambiguous. Is it a confabulation, brought on by incipient dementia, which she – at least some of the time – believes? Is it a playful narrative which she enjoys but does not take seriously? The text eventually suggests that she consciously maintains the story to distract Dorothy and herself from ‘the real horrors which surrounded them’ (44), yet doubts remain as she makes continuing claims of murder mysteries even after Dorothy has passed beyond the need for stories. Other residents, apparently displaying the effects of dementia, engage in irrational activities such as attempting the impossible task of solving a jigsaw puzzle cannibalised from different sets, or making urgent calls to the police oblivious to the fact that the phone is disconnected (12). These seem to resonate subtly with Rosemary’s own words and actions: her interpretation of events sometimes seems to be a patchwork cannibalised from half-remembered mystery novels; it is not clear whether a real connection lies behind the suspicions in which she tries to interest the police.

Anderson makes the most of this doubt when confronted. Denying accusations of mistreatment, he claims that the residents prefer ‘to ascribe [their] suffering to individual villainy rather than to the shortcomings of the health service and the workings of a fate which is simply indifferent to human misery’ (119). He attributes Rosemary’s allegations to Quixotean confabulation and fiction. The reader already knows that Rosemary’s key motivation in spinning the shared whodunnit with Dorothy is to distract her friend from her pain and illness; could Anderson have a point when he dismisses the accusations by residents as attempts to ‘contain their terror by recasting themselves’ (81)? Critics have, after all, interpreted the whole appeal of crime fiction as a genre as linked to the desire to deny and transcend inevitable mortality by unravelling, explaining, and thereby making safe, the circumstances around untimely death (Dunant).

Since it turns out that Dorothy was not murdered and in this respect Anderson is correct, this possibility is never entirely dispelled. Indeed, the text's consistent playful oscillation between notions of fiction and the 'tyranny of the real' (67) seems to suggest that crime fiction is escapism from the real horrors of ageing, institutional abuse and societal ageism. All of us who find ourselves intrigued by the mystery of a murder plot – Rosemary and Dorothy; Inspector Jarvis; an indifferent society that unthinkingly consigns the residents to the mercies of such as Anderson and Letitia; the novel's readers – avert our gaze from the 'mundane' indignities and abuses to be found in residential care.

Dibdin was responding to contemporary concerns in highlighting this issue. While family abuse of older adults had been recognised as a significant social concern some years before, it was only in the early to mid-1990s that elder abuse within institutions started to receive comparable attention. Despite incidents such as the Nye Bevan Lodge abuse scandal in 1987, elder abuse in nursing homes had a low profile and government had seemed disinclined to look closely into the matter (Johnson; Moore; Penhale). Moreover, given the significant increase in demand for residential care during the 1980s, the right-wing Conservative government of the time was also keen to keep costs down and shifted provision to the private sector with the NHS and Community Care Act of 1990, arguably with knock-on effects on quality of care (Biggs; Hinchliffe). Partly in response professional and activist groups started to campaign for improved standards (Biggs 72). The voluntary sector organisation Action on Elder Abuse was founded in 1993, and in the same year the Department of Health published guidelines on responding to elder abuse, *No Longer Afraid* – a document that Biggs describes as 'almost wilfully myopic' (74) with regard to the existence of elder abuse within institutions. It is against this background that *TDOTL* was published, also in 1993. Elder abuse was becoming a recognised social concern, but only very slowly.⁴ Despite the postmodern playfulness of Dibdin's genre pastiche, the text is also driven by critique of the

harrowing treatment that it was becoming apparent older residents were receiving in some nursing homes. Indeed, the way that the novel keeps reality and denial, unglamorous abuses and elaborate murder mystery, in continuing tension throws into relief how society averted its eyes from the extent to which ill-treatment could be found in the very institutions which were supposed to provide a safe, caring environment.

Discussion

EL and *TDOTL* are examples of two quite different approaches to detective fiction, separated by nearly a decade. Yet both tackled complex questions of ageing, dementia and abuse, demonstrating that the history of dementia-themed detective fiction is longer than is typically acknowledged. Neither novel presents a positive, affirming view on old age, unsurprisingly given crime fiction's characteristic focus on the macabre and the dark side of human nature. They were neither written nor read as straightforward social realism, so it would be mistaken to analyse them uncritically as representative depictions of the situation of older adults. Yet equally, they needed to resonate and reflect something of the fears and experiences of their time if they were to appeal to their readership, and, as shown, they did indeed connect with emerging public awareness of the social problems besetting elder care.

Something of a turning point in crime fiction's treatment of dementia came with the appearance of *Small World* (2003), originally published in German in 1997. A thriller rather than a detective story, Suter's novel follows Konrad Lang, a hanger-on to a wealthy aristocratic family. Konrad develops progressively worsening symptoms of dementia, precipitating a series of events which ultimately reveal that he, purportedly the child of the family's maid, had been swapped in childhood with the family's primary heir. Finally he regains his status as heir despite the machinations of the family matriarch. The book was

innovative within the broader crime fiction genre in featuring significant passages presenting the viewpoint of a character with dementia. Another new development was that Konrad's dementia is finally halted by the fictional drug Amildetox, an experimental medication pioneered in treating him. Therapeutic optimism along these lines, unprecedented within crime fiction, had only then become feasible with the recent licensing of Tacrine within the USA for dementia treatment and the subsequent development of further 'memory enhancer' medications. While in *Small World* pharmaceutical advances are used as a far-fetched *deus ex machina* plot resolution, in the real world they certainly contributed to a more hopeful vista for dementia care, even if early optimism about their potential efficacy was not fully realised (Ballenger, *Treating*). *Small World*, unusually for the time, is crime fiction with a positive ending for a character with dementia.⁵ It indirectly testifies to a changing medical landscape and, just as significantly, a parallel movement towards more person-centred approaches to people with dementia that were opening up new possibilities for storytelling. These possibilities have flourished with the new wave of dementia detectives.

Hill's and Dibdin's work, by contrast, highlighted limitations rather than possibilities: the limitations of detection and medical care. They pondered whether these approaches, both equally rooted in modernist rationality, could truly meet the challenges with which dementia and elder care confronted them. *EL* illustrated the impotence of medicine and criminal investigation when faced with dementia and the pervasive threats hidden behind facades of family and residential care, for all that smaller mysteries might sometimes be resolved by effective sleuthing. It paints a bleak picture of elder care, but in the service of critique rather than to condone. *TDOTL* drew on postmodernist narrative devices to throw into sharp relief the comforting conventions of detective fictions, turning on its head the typical crime novel scenario where to reveal that murder accusations are unfounded is to restore a world of order and safety. The opposite becomes true, as to show Rosemary's suspicions to be delusional

would be to open up the terrifying prospect of senility and dementia; yet, if they are true residents are revealed to be helpless against horrifying levels of abuse within a care system supposed to support them. Both novels raise disturbing questions about older people's rights in practice, and therefore about citizenship, suggesting that for many the protection offered by both the law and by institutions supposedly of care does not extend far into later life.

Long before the 'new wave', then, authors were applying the distinctive potential of crime fiction to stimulate reflection on what society is prepared to accept as right and wrong to themes of dementia and care. Through narratives centred on the investigation of specific crimes, they highlighted the unacceptability of what sometimes passed for 'care' and called into question the culpability of a wider society that failed to ensure adequate provision for its elders. While some contemporary writers (Lindgren, McFarlane) have explored failings of elder care, social critique of care provision is perhaps less conspicuous amidst the current generation. It would be encouraging to think that care has improved such that critique is no longer needed; regrettably, the evidence suggests that there is ample subject matter for Hill's and Dibdin's successors today. As dementia-themed crime fiction continues to boom, no doubt the genre's unique characteristics will again be pressed into service to engage with the important challenge presented by shortcomings of care.

Works Cited

Ballenger, Jesse. *Self, Senility, and Alzheimer's Disease in Modern America*. Johns Hopkins University Press, 2006.

———, Peter Whitehouse, Constantine Lyketsos, Peter Rabins and Jason Karlawish, eds.

Treating Dementia: Do We Have a Pill for It? Johns Hopkins University Press, 2009.

- Bartlett, Ruth and Deborah O'Connor. *Broadening the Dementia Debate: Towards Social Citizenship*. Policy Press, 2010.
- Biggs, Simon. 'A family concern: elder abuse in British social policy.' *Critical Social Policy* vol. 16 no. 47, 1996, pp. 63-88.
- Bitenc, Rebecca. 'Representations of dementia in narrative fiction.' *Knowledge and Pain*. Brill, 2012, pp. 305-329.
- Bradford, Richard. *Crime Fiction: A very short introduction*. Oxford University Press, 2015.
- Brogden, Mike and Preeti Nijhar. *Crime, Abuse and the Elderly*. Willan, 2000.
- Brooks, Peter. *Reading for the Plot: Design and Intention in Narrative*. Harvard University Press, 1984.
- Burke, Lucy. 'The locus of our dis-ease: narratives of family life in the age of Alzheimer's.' *Popularizing Dementia: Public Expressions and Representations of Forgetfulness*. Transcript, 2015, pp. 23-41.
- . 'Missing pieces: trauma, dementia and the ethics of reading in *Elizabeth is Missing*.' *Dementia and Literature: Interdisciplinary Perspectives*. Routledge, 2017, pp. 88-102.
- Chandler, Raymond. *The Simple Art of Murder*, 1950,
<http://www.en.utexas.edu/amlit/amlitprivate/scans/chandlerart.html>
- Cleave, Paul. *Trust No-One*. Mulholland, 2015.
- Cullin, Mitch. *A Slight Trick of the Mind*. Doubleday, 2005.
- Dällenbach, Lucien. *The Mirror in the Text*. University of Chicago Press, 1989.
- Dibdin, Michael. *The Dying of the Light*. Faber & Faber, 1993.

- Dunant, Sarah. 'Body Language: A Study of Death and Gender in Crime Fiction.' *The Art of Detective Fiction*. Palgrave Macmillan, 2000, pp. 10-20.
- Falcus, Sarah and Katsura Sako. *Contemporary Narratives of Dementia: Ethics, Ageing, Politics*. Routledge, 2019.
- Harris, Marla. 'The case of the missing memory: dementia and the fictional detective.' *Clues*, vol. 37 no. 1, 2019, pp. 51-60.
- Heaberlin, Julia. *Paper Ghosts*. Ballantyne, 2018.
- Healey, Emma. *Elizabeth is Missing*. Penguin, 2014.
- Hepworth, Mike. *Stories of Ageing*. Open University Press, 2000.
- Hill, Reginald. *Exit Lines*. HarperCollins, 1984.
- Hinchliffe, David. 'Terrifying truth about how care homes are run.' *The Guardian*, 26 Nov 2018, <https://www.theguardian.com/society/2018/nov/26/terrifying-truth-about-how-care-homes-are-run>.
- Johnson, Fiona. 'What is an 'adult protection' issue? Victims, perpetrators and the professional construction of adult protection issues.' *Critical Social Policy*, vol. 32 no. 2, 2011, pp. 203-222.
- LaPlante, Alice. *Turn of Mind*. Vintage, 2011.
- Lindgren, Minna. *Death in Sunset Grove*. Pan, 2016.
- Malmgren, Carl Darryl. *Anatomy of Murder: Mystery, detective, and crime fiction*. Popular Press, 2001.
- Mankell, Henning. *The Troubled Man*. Vintage, 2011.
- May, Peter. *The Lewis Man*. Quercus, 2012.

- McFarlane, Fiona. *The Night Guest*. Sceptre, 2014.
- Meeks, Spencer. 'Neuro-Crime Fiction: detecting cognitive difference.' *Crime Fiction Studies*, vol. 1 no. 1, 2020, pp. 79-95.
- Merivale, Patricia and Susan Sweeney. 'The Game's Afoot: On the trail of the metaphysical detective story.' *Detecting Texts: The Metaphysical Detective Story from Poe to Postmodernism*. University of Pennsylvania Press, 1999, pp. 1-24.
- Miller, Baila, Michael Glasser and Susan Rubin. 'A Paradox of Medicalization: Physicians, Families and Alzheimer's Disease.' *Journal of Aging Studies*, vol. 6 no. 2, 1992, pp. 135-148.
- Moore, Steve. *The Abuse of Older People in Private Sector Care Homes: Why does it occur? Why does it endure?* PhD thesis submitted to the University of Birmingham.
<https://etheses.bham.ac.uk/id/eprint/6983/1/Moore16PhD.pdf>, 2015.
- Murray, Stuart. 'Neurotechs: Detectives, Disability, and Cognitive Exceptionality in Contemporary Fiction.' *Constructing Crime: Discourse and Cultural Representations of Crime and 'Deviance'*. Palgrave Macmillan, 2012, pp. 177-189.
- Ogg, Jim and Carol Munn-Giddings. 'Researching Elder Abuse.' *Ageing and Society* vol. 13, 1993, pp. 389-413
- Orr, David M.R. 'Carers' responses to shifting identity in dementia in *Iris* and *Away From Her*: cultivating stability or embracing change?' *Medical Humanities*, vol. 41 no. 2, 2015, pp. 81-85.
- . 'Dementia and detectives: Alzheimer's disease in crime fiction.' *Dementia*, vol. 19 no. 3, 2020, pp. 560-573.

Penhale, Bridget. 'Elder abuse in the United Kingdom.' *Journal of Elder Abuse & Neglect*, vol. 20 no. 2, 2008, pp. 151-168.

Rowland, Susan. 'The Wasteland and the Grail Knight: Myth and Cultural Criticism in Detective Fiction'. *Clues*, vol. 28 no. 2, 2008, pp. 44-54.

Sako, Katsura. 'Dementia and detection in *Elizabeth is Missing* and *Turn of Mind*.' *Contemporary Women's Writing*, vol. 10 no. 3, 2016, pp. 315-333.

Snyder, David T. and Sharon Snyder. *Narrative Prosthesis: Disability and the Dependencies of Discourse*. University of Michigan Press, 2000.

Suter, Martin. *Small World*. Vintage, 2003.

Zimmermann, M. *The Diseased Brain and the Failing Mind: Dementia in Science, Medicine and Literature of the Long Twentieth-Century*. Bloomsbury, 2020.

¹ Martine Zimmermann's review gives due consideration to 1990s detective fiction. Her analysis of *The Dying of the Light* complements that presented here.

² By contrast, non-genre fiction's treatment of dementia in this period has received greater consideration by critics (e.g. Burke, *Locus*; Zimmermann). However, this body of work lies outside the scope of this article.

³ Some crime novelists explicitly make this connection (e.g. Heaberlin, 345).

⁴ This is attested by a UK Central Council on Nursing and Midwifery report the following year, which found significant obstacles to whistleblowing and reporting, and that known cases were only 'the tip of a rather unsavoury iceberg' (cited in Brogden and Nijhar 86-7).

⁵ Falcus and Sako have rightly critiqued Suter for both skating over the realities of dementia and reproducing a narrative of identity restitution which uncritically equates dementia with loss of self, albeit *Small World*'s conclusion does suggest that memory loss need not be antithetical to 'living well.' My observation here that *Small World* showed how optimism regarding dementia, whether in the unlikely form of cure / recovery or in suggesting that there might be possibilities for continuing quality of life even in the presence of symptoms, was becoming newly thinkable within the pages of crime fiction need not contradict their analysis.
